PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Pate Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 JUL 0 5 7006 or Fax (571)-273-2885 INSTRUCTIONS: 4/1s form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where propriate. All abover correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indication of maintenance fees will be mailed to the current correspondence address as indication of maintenance fees will be mailed to the current correspondence address as indications of maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for mailed to the current correspondence address as a separate "FEE ADDRESS". fce notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 05/23/2006 Certificate of Mailing or Transmission Twin Oaks Office Plaza I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. 477 Ninth Avenue Suite 112 San Mateo, CA 94402 Kin Hung Lai (Signature) (Date) FIRST NAMED INVENTOR CONFIRMATION NO. APPLICATION NO. FILING DATE ATTORNEY DOCKET NO. CTC-401 7685 09/934.356 08/21/2001 Dale E. Koop 07/07/2006 CNGUYEN1 00000064 09934356 TITLE OF INVENTION: ENHANCED NONINVASIVE COLLAGEN REMODELING 01 FC:2501 700.00 OP 02 FC:1504 300.00 OP APPLN. TYPE **SMALL ENTITY** ISSUE FEE **PUBLICATION FEE TOTAL FEE(S) DUE** DATE DUE \$1000 08/23/2006 nonprovisional YES \$700 \$300 **EXAMINER** ART UNIT **CLASS-SUBCLASS** FARAH, AHMED M 607-088000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Ray K. Shahani, Esq. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Roseville, California CoolTouch Incorporated Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): X Issue Fee X A check in the amount of the fee(s) is enclosed. X Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charee the required fee(s), or credit any overpayment, to Deposit Account Number _ 503056 __(enclose an extra copy of this form). Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication (Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other party in interest as shown by the records of the United States Patent and Trademark Office.

Date

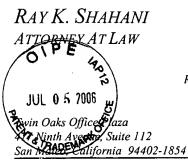
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Authorized Signature

Typed or printed name

Ray K. Shahani, E



Registered Patent Attorney - Technology and Intellectual Property Matters http://www.attycubed.com

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: KOOP ET AL.)	TRANSMITT	AL
Serial No.: 09/934,356)		
Filing Date: August 21, 2001)	Date Mailed:	June 29, 2006
Attorney Docket No.: CTC-401)	Examiner:	FARAH, Ahmed
Title: ENHANCED NONINVASIV COLLAGEN REMODELING	,	Group Art Unit: 3739	
Mail Stop: Issue Fee	/		
Commissioner for Patents P.O. Box 1450			
Alexandria, VA 22313-1450			

TRANSMITTAL

Dear Sir:

Enclosed please find the following documents related to the above-entitled patent application:

- 1. ISSUE FEE TRANSMITTAL: 1 page(s);
- 2. ISSUE FEE, \$1,000.00, NSL item: <u>052700</u>;
- 3. FEE AUTHORIZATION, RKS item: 1; and
- 4. Return Receipt Postcard.

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Title: ENHANCED NONINVASIVE COLLAGEN REMODELING Serial No.: 09/934,356

Attorney Docket No.: CTC-401 Tr-IssueFee-062906-1.wpd

Respectfully submitted,

Dated: June 29, 2006

RAY K. SHAHANI

Ray K. Shahahi,

Attorney for Applicant(s)

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Registration No.: 37,554

CERTIFICATE OF MAILING

I hereby certify that this paper and the documents attached hereto are being deposited in a postage prepaid, sealed envelope with the United States Postal Service using First Class Mail service under 37 CFR 1.08 on the date indicated and is addressed to "Commissioner for Patents, Virginia 22313-1450". Signed:

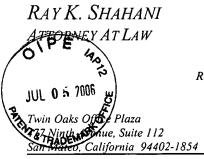
"Commissioner for Patents, Virginia 22313-1450". Signed: _

Date Mailed: June 29, 2006

Title: ENHANCED NONINVASIVE COLLAGEN REMODELING

Serial No.: 09/934,356 Attorney Docket No.: CTC-401 Tr-IssueFee-062906-1.wpd

Page 2 of 2



Registered Patent Attorney - Technology and Intellectual Property Matters http://www.attycubed.com

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:) FEE AUT	HORIZATION	
KOOP ET Al.)		
)		
Serial No.: 09/934,356)		
Filing Date: August 21, 2001))		
Attorney Docket No.: CTC-401) Examiner:	FARAH, Ahmed	
Title: ENHANCED NONINVASIVE COLLAGEN REMODELING) Group Art	Group Art Unit: 3735	
Mail Stop: Issue Fee	_)		
Commissioner for Patents			
P.O. Box 1450			
Alexandria, VA 22313-1450			

FEE AUTHORIZATION

Dear Sir:

Please charge any underpayment and/or credit any overpayment to the Deposit Account No. 503056 (37 C.F.R. § 1.17; PTO Code 216). A duplicate of this paper is attached.

Respectfully submitted,

Dated: <u>June 29, 2006</u>

Ray K. Shahani, Pso Registration No.: 37,554

Attorney for Applicant(s)

FEE AUTHORIZATION Filing Date: August 21, 2001

Title: ENHANCED NONINVASIVE COLLAGEN REMODELING

Serial No.: 09/934,356 Attorney Docket No.: CTC-401 FeeAuth-062906-1.wpd